



**THE 9TH INTERNATIONAL
CONFERENCE OF THE
INTERNATIONAL MESOTHELIOMA
INTEREST GROUP
25-27 SEPTEMBER 2008**



Registration Form

Preferred method of registration and abstract submission: www.imig-online.com/congress

First name: Middle initial Last name:

Physician PhD Other,

Mailing address: Postal/ Zip code.....

City: Prov/ State Country

Email: Phone: Fax

(email and fax must be provided; confirmation will be sent by email)

Birth date: (DD.MM.YY)

Phone: + 31 20 512 2665

Fax: + 31 20 512 2679

E-mail: j.remmelzwaal@nki.nl

Please check the appropriate category:

Early registration (till July 1st) € 250,- Late registration € 375,-
 Congress dinner € 75,-

Payment can be made by: Paypal (Visa MasterCard)
 Check American Express

Name as it appears on credit card: Signature:

Card number: Expiration date: Security code

Billing address of card (if different from above; zip code required): Street:

City: State: Zip:

Please make checks payable to iMig.

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A cancellation of 25% will be assessed on refunds prior to July 1st and a 50% cancellation fee will be applied to requests between July 1st-september 1st. No refunds will be made after September 1st. There is no charge for substitution. An additional 3% charge will be deducted from all credit card refunds.